

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
09/199,888

FILING DATE  
11/24/98

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3	1					
4						
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7	1					
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TOTAL IND.	5					
TOTAL DEP.	15					
TOTAL CLAIMS	20					

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TOTAL DEP.				
TOTAL CLAIMS				